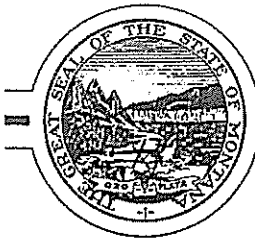


DEPARTMENT OF
PUBLIC HEALTH AND HUMAN SERVICES




JUDY MARTZ
GOVERNOR

GAIL GRAY, Ed.D.
DIRECTOR

STATE OF MONTANA

Developmental Disabilities Program
PO Box 880
Miles City, MT 59301
Phone: (406) 232-2595
Fax: (406) 232-0885
e-mail: nomartin@state.mt.us

TO: Sherman Weimer, Executive Director
Jean Nolan, Board Chairperson
Eastern Montana Industries

FROM: Novelene Martin 
Quality Improvement Specialist

DATE: June 2, 2004

SUBJECT: Quality Assurance Review

The annual Quality Assurance Review was conducted on March 8 through March 12, 2004. The results of this review are attached. The review went very well and all staff were very helpful during the review process. I appreciate EMI's rapid and thorough response to any concerns noted during the review.

Attachment

cc: Dain Christianson, DDP Regional Manager
Tim Plaska, Community Services Bureau Chief
Perry Jones, Waiver Coordinator
John Zeeck, Quality Assurance Specialist

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Eastern Montana Industries Quality Assurance Review

An on-site quality assurance review of Eastern Montana Industries (EMI) was conducted on March 8 through March 12, 2004. The reviewed included all services EMI provides through their contract with the Developmental Disabilities Program.

ADMINISTRATIVE

This past year, EMI expanded their services in Glendive. Two four-person group homes were constructed. Eight individuals who had been residing at the Eastmont Human Service Center moved into these new homes in December. EMI also expanded their day program in Glendive to meet the vocational needs of these individuals. All EMI group homes are licensed through the Quality Assurance Division. The licensing review found no significant deficiencies. The homes are inspected yearly by the County Sanitarian and the Fire Marshall. These inspections found no significant deficiencies.

A financial audit was completed by Rowland, Thomas and Company. No reportable instances of material non-compliance were found. There were two items of immaterial non-compliance which EMI has resolved.

During our on-site visit, we found no instances of segregation between the individuals and the staff (QAOS 7). EMI continues to focus on training and skill development programs for the individuals receiving services (QAOS 11). This past year EMI formed an internal Quality Assurance Committee. This committee is one example of EMI's commitment to consumers and providing quality services (QAOS 9).

RESIDENTIAL SERVICES

For the QA review, one individual from each group home was randomly selected. These individuals were:

selected for the review of supported living.

I. Health and Safety: During the review, no significant health and safety concerns were noted. During our visit to Boxelder group home, the water temperature was 140 degrees. EMI contacted a plumber as soon as they were aware of this and the mixing valve on the hot water heater was immediately replaced (QAOS 20). There were no towels for drying hands in Boxelder's basement bathroom and the bathrooms at South Earling. EMI is exploring putting up hand dryers in these two homes. In the meantime, hand sanitizer will be available in the bathrooms (QAOS 16). Medication administration errors this past year have mostly involved forgetting to sign-off as the person who assisted in the administration. There have also been instances of missed or late medications, however a medical professional has been contacted in each instance. The missed medications have not resulted in any change in the consumer's health. EMI is continuing to update individual doctor orders for over-the-counter medications. This has

been a slow process since the local physician is carefully checking indications of the over-the-counter medications. EMI has instructions located in the medication book. These instructions include the over-the-counter and PRN medications that can be used and guidance for the use of those medications (QAOS 19). Until all medications sheets for over-the-counter medications are updated, EMI is contacting the physician's office to ensure the medication is safe for the consumer. All individuals reviewed have either reached their maximum capacity on self-administration of medications or are on a program teaching a component of self-administration. During a review of medication logs, all staff that have assisted with medication administration are certified.

Each of the homes provides the individuals a comfortable, safe place to live. The homes are nicely decorated and the individual bedrooms are clearly decorated and cleaned to the consumer's liking. Many individuals were proud to give us a tour of their home and show us their bedroom. During visits to all homes, we saw individuals involved in the daily routine of the home such as helping with chores, doing leisure activities, and going on outings. Fire evacuation and emergency evacuation drills are done in each home.

invited us to her house for the review. She lives with her roommate in a very nice house. Fire extinguishers and smoke detectors are in working order in the home. Alvera has an emergency call list posted by the telephone and relayed to us how to use this list. She was also able to tell us how to evacuate her home, including to stay low to the ground, to check a closed door for heat, and how to go out a window safely. The staff do a terrific job teaching health and safety skills to the individuals. The emergency situation program is well written and covers a variety of emergency related situations, not just fire (QAOS 8).

II. Service Planning and Delivery: EMI continues to have training objectives as part of the Individual Plan for many individuals. They continue to strive to have individuals gain skills and build upon existing skills. During the review, several service objectives did not include adequate information for the staff to consistently implement the objective. EMI has developed a service objective cover sheet that includes a description clarifying for staff the necessary components. The specific objectives we identified in the QA review have been corrected (QAOS 24). At the Hafla Group Home, Wyoming Group Home, and Brockway Group Home, we found several training objectives that were not implemented within the time frame specified in the Individual Plan. EMI will review the programs more often to ensure objectives are implemented as specified in the Individual Plan (QAOS 27). Bathing procedures are not being consistently addressed during Individual Planning meetings. EMI will add this to their internal IP checklist to remind staff to address this topic at IP meetings (QAOS 17).

We found evidence of daily opportunities for a leisure activity and weekly opportunities for integrated community outings in most settings. At the three Glendive homes (Nolan, Brockway, and Wyoming) and South Earling in Miles City, there was no documentation of providing the opportunity for daily leisure and weekly integrated community outings. This issue was address by EMI before the QA review was completed. At South Earling Group Home, it was discovered that the staff were uncertain as to what needed to be

recorded. This has been clarified at a staff meeting. In Glendive, EMI scheduled an inservice for the staff explaining leisure, integrated community outings, and the need to document the activities. The documentation will be reviewed on at least a bi-weekly basis by a supervisor in the Glendive program. At the end of each month, the data will be sent to the Miles City office (QAOS 15). In general, the leisure and integrated community outings taking place are very creative and individualized.

The individuals reviewed had no client right's restrictions in place. During consumer interviews, folks were able to tell us who they would talk to if they had a problem or wanted something to be different.

Consumers all expressed satisfaction with the services they were receiving from EMI. EMI also does a consumer satisfaction survey. The consumer satisfaction survey includes individuals receiving services, their family, their advocates, case management and the Developmental Disabilities Program along with other agency in the area who work closely with EMI.

During visits through the year and while doing the on-site QA review, many instances were observed of emotionally responsible care giving. When we visited Hafra group home, one individual was having a difficult morning. The staff took turns interacting with him, no pressure was put on him, and all interactions were positive (QAOS 4). At Stephanie Group Home, staff were assisting the individuals in fixing their hair, making sure the individual's clothes matched, and paying attention to make sure the consumers looked nice (QAOS 12). A concerned noted while at Boxelder was the combing/brushing of an individual's hair while she was seated at the breakfast table. Staff have been told to brush her hair in a chair away from the breakfast table and let her use a mirror so she can assist with the task (QAOS 18). During our visit to South Earling Group Home we observed a female individual in the office getting dressed after bathing in the bathroom located off the office. The door was wide open, the blinds for the outside window were open, and the blinds between the office and the living room/dining room were open. While another individual was toileting, the bathroom door was left open. EMI has spoken with staff to remind them of the need to treat consumers with dignity and respect. Staff will make sure blinds are lowered and bathroom doors are left ajar only when necessary (QAOS 22).

III. Staffing: Criminal background and child protective services checks have been completed on the five most recent hires. The staff have also completed EMI's orientation training. During spot checks of the group homes and day programs throughout the year, I always found the required number of staff on duty. EMI self-reports instances where they are not meeting the minimum staff ratio. There have been few instances of this and usually they are only short staffed for a couple hours while a substitute staff is located. As part of the QA review, staff are asked a variety of questions. During the review, many staff indicated the only training they receive regarding individual specifics is during orientation training. Staff also indicated they receive initial training only on behavior plans and no ongoing/refresher training about the behavior plans. Group Home managers have been requested to complete brief profiles on

each consumer in their group home for review by substitute staff and new staff. Ongoing/refresher training about behavior plans will be offered to staff members at monthly staff meetings (QAOS 23).

IV. Incident Management: During staff interviews, staff did not seem to be aware of the mandatory reporting of suspected abuse, neglect, and exploitation to Adult Protective services. EMI has made posters of the mandatory reporting requirements and they are posted in all areas. The Group Home managers have reviewed this information at the first staff meeting following the QA review (QAOS 21). EMI also has the information about mandatory reporting (names and phone numbers) directly on the incident report form. All staff knew when and how to fill out an incident report. If they had questions, they knew to speak with their supervisor. Incidents that have been referred to Adult Protective Services have been responded to in a timely manner by EMI.

WORK/DAY/COMMUNITY EMPLOYMENT

For the QA review, the sample included those individuals listed above in the residential services along with

I. Health and Safety: During the QA review, no significant health and safety issues were identified. QAOS 19 noted above in the residential setting also applies to the work/day/community employment services. Evacuation drills are completed at all vocational sites. EMI does a good job of providing training in work safety skills to individuals (QAOS 8). This training includes recycling safety, lifting techniques, chemical safety and first aid.

II. Service Planning and Delivery: While observing the work activity center in Miles City, we observed individuals doing a variety of activities and in general, staying busy (QAOS 6). The staff member working with [redacted] does an exceptional job work with [redacted] (QAOS 5). During the QA on-site review in Glendive, we observed numerous examples of very positive interactions with individuals (QAOS 2). While reviewing the data collected in the intensive day program in both Glendive and Miles City, the data being collected did not always match the IP objective. Staff have received instruction on data collection (QAOS 25). While reviewing IP objective data at the Miles City day program (work activity and intensive training unit), objectives are not being ran according to the frequency specified in the IP. The Work Activity Center Manager and Intensive Center Manager will check to see that programs are being ran as required by the IP (QAOS 26). During the on-site visit at the work activity center, the reinforcement program for [redacted] was observed being ran as a response cost program. EMI immediately discussed the correct language to use when running the program and an inservice on the program was scheduled for April 2 (QAOS 28).

The individuals reviewed had no rights restriction in place at the vocational setting. During client interviews, the individuals were generally able to tell us who they would talk to with any concerns. The individuals spoke highly of their work supervisor. Several consumer's expressed how much they liked working at EMI.

III. Staffing: Criminal background and child protective services checks have been completed on the five most recent hires. The staff have also completed EMI's orientation training. During spot checks of the day programs throughout the year, I always found the required number of staff on duty. EMI also self-reports instances where they are not meeting the minimum staff ratio. As part of the QA review, staff are asked a variety of questions. During the review, many staff indicated the only training they receive regarding individual specifics is during orientation training. Staff also indicated they receive initial training only on behavior plans and no ongoing/refresher training about the behavior plans. Ongoing/refresher training about behavior plans will be offered to staff members at monthly staff meetings (QAOS 23).

IV: Incident Management: During staff interviews, staff did not seem to be aware of the mandatory reporting of suspected abuse, neglect, and exploitation to Adult Protective services. EMI has made posters of the mandatory reporting requirements and they are posted in all areas. The supervisors have reviewed this information at the first staff meeting following the QA review (QAOS 21). EMI also has the information about mandatory reporting (names and phone numbers) directly on the incident report form. All staff knew when and how to fill out an incident report. If they had questions, they knew to speak with their supervisor. Incidents that have been referred to Adult Protective Services have been responded to in a timely manner by EMI.

COMMUNITY SUPPORTS

A minimum of five individuals are reviewed for the QA review of Community Supports. The individuals selected for the review were:

..... Each individual uses most if not all of their community supports funding to purchase vocational services from EMI.

I. Health and Safety: There we no health and safety concerns for the individuals receiving community supports. Each of the individuals receives most of their residential support from family and the family primarily ensures the health and safety needs of the individual are being met.

II. Service Planning and Delivery: The objectives are being implemented as specified in the IP for each of the individuals. The individuals are on a variety of objectives includes budgeting, work skills, safety, etc. A review of the consumer surveys completed by case management showed individuals being happy and satisfied with the service. As part of our review, we also completed a few consumer surveys and the individuals interviewed expressed their happiness with the services and work opportunities provided by EMI.

III. Staffing: Since the individuals included in the QA review all receive vocational services from EMI, the section III. Staffing from the Work/Day/Community Employment section would apply to the Community Supports review.

IV. Incident Management: Since the individuals included in the QA review all receive vocational services from EMI, the section IV. Incident Management from the Work/Day/Community Employment section would apply to the Community Supports review.

COMMENTS/SUGGESTIONS

1. During the review of leisure and integrated community outing records, it seems like some outings may be those that individuals have earned as part of their behavior management program. An outing earned through a behavior management plan does not meet the State requirement for integrated community outings. The outing (spend-out) is an extra the person has earned, not what they are entitled to under Administrative Rule.
2. Diets recommended by physicians should be addressed through the IP team. It Glendive, it was noted that the physician is recommending some restricted calorie diets, yet this was not addressed to the IP team.
3. As a result of the review of fire drills, we have a couple comments. It might be beneficial to add an AM/PM option on the time. On some reports staff did not indicate if it was am or pm, making it difficult to determine when the drill was ran. Also, EMI may want to address what evacuation procedures would be utilized during the middle of the night when only one staff is on shift.
4. Now that EMI is serving an individual who required tube feeding, a policy addressing this may be necessary. The rule regarding tube feeding states that a nurse may authorize a non-medical person to tube feed. How this authorization and the training required to be authorized should be addressed in some type of policy.
5. The task analysis for the medication administration programs in Glendive were the same for the two individuals we reviewed. During the next QA review, we will be looking closer at individuals who are on medication programs or those where the IP team has determined they have met their maximum capacity to ensure compliance with the administrative rule.
6. While we see improvement at the ITU in Miles City, we are still concerned about the same objectives being in place for individuals year after year. As the individuals age, their needs are likely to be changing, yet it seems like their objectives are not.
7. Mandt training needs to be offered on a regular basis. Possibly, one day every other month needs to be regularly set as Mandt training day.

CONCLUSION

EMI has responded to each QAOS with a plan of correction. In several instances, EMI had implemented a plan to correct the concern before the QA on-site visit was completed.

EMI is to be commended for the quick response to the deficiencies noted in the QA review. All finding are considered closed as a result of the response from EMI.